COMBINED DECLARAT	TION FOR UTILITY OF	R DESIGN PATENT	PB60445
APPLICATION WITH PO	First Named Inventor:		
	·		Craig JAMIESON
() Declaration submitted with initial filing	g or		Complete if known: App No.:
() Declaration submitted after initial filing	•		
			Filing Date
			Group Art Unit:
As below named inve	ntor. I hereby declare that:	,	
My residence, post office addre	ess and citizenship are as stated bel	low next to my name.	
•	st and sole inventor (if only one nar ow) of the subject matter which is c		2
·	NOVEL COMP	OUNDS	
the specification of which (che	eck only one item below):		
lis attached hereto. OR			į
	States application Serial No.	or PCT Internationa	i
Application Number PCT/EP (if appli	2004/009078 filed 12 August 200 icable)	4 and was amended on (MM/DI	D/YYYY)
-	ewed and understand the contents on the specifically referred to above.	f the above-identified specification	on, including the claims,
Lacknowledge the duty to disc	close information which is material	to patentability as defined in 37	CFR §1.56.
I hereby claim foreign priority benefits inventor's certificate or 365(a) of any P States of America, listed below and havinventor's certificate or of any PCT intectaimed:	PCT international application which we also identified below, by checking	n designated at least one country of the box, any foreign application	other than the United in for patent or
PRIOR FOREIGN AND ANY PRIO	RITY CLAIMS UNDER 35 U.S.	1	
Prior Foreign Application Number (s)	Country Foreign Filing Date (MM/DD/YYYY))		PRIORITY CLAIMED
1. 0319150.9	GB	14 August 2003	. X
2.			
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4.			
5.			
I hereby claim the benefit under Title 3			incation(s) listed below:
Application No.	ruing Dat	e (MM/DD/YYYY)	
2.			
3.			

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY

ATTORNEY'S DOCKET NUMBER PB60445

Continued

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR IIS	PARENT	APPLICATION .	or PCT PARENT	APPLICATION
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		1	STATUS (Check one)		
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED	

POWER OF ATTORNEY: As a named inventor, I hereby appoint the practitioners associated with the Customer Numbers provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith Customer Number 23347 and Customer Number 20462

Address all correspondence and telephone calls to Customer Number 20462

Direct Telephone Calls to: Soma SIMON 610 270 5019

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

 	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAMEZINITIAL
2	OF INVENTOR	JAMIESON	Craig	
	INVENTOR'S	Signature		Date:
	SIGNATURE			
O	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Newhouse	Lanarkshire, Scotland	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline Corporate	King of Prussia	Pennsylvania 19406-0939, US
		Intellectual Property - UW2220,		
		P O Box 1539		
-	FULL NAME	- FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAMEZINITIAL
2	OF INVENTOR	MILLER	David	Drysdale
}	INVENTOR'S	Signature (,)	7/	Date:
	SIGNATURE	Land & Ma	IV	10 October 2004
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Stevenage	Hertfordshire, GB	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline Corporate	King of Prussia	Pennsylvania 19406-0939, US
İ		Intellectual Property – UW2220,	j	
		P O Box 1539		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	RAMI	Harshad	Kantilal
	INVENTOR'S	Signature		Date
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
ł	CITIZENSHIP	Harlow	Essex, GB	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline Corporate	King of Prussia	Pennsylvania 19406-0939, US
:	i.	Intellectual Property – UW2220,		
		P O Box 1539		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	THOMPSON	Mervyn	
	INVENTOR'S	Signature		Date:
_	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Harlow	Essex, GB	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS	GlaxoSmithKline Corporate	King of Prussia	Pennsylvania 19406-0939, US
		Intellectual Property - UW2220,		
		P O Box 1539		

COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT					PB60445		
APPLICATION WITH	APPLICATION WITH POWER OF ATTORNEY						
() Declaration submitted with initial	I filing or		•	Complet App No.	e if known:		
() Declaration submitted after initial	I filing (surcharge i	required 37CFR1.16(e))	•	Filing Date			
·				Group A	rt Unit:		
As below named	l inventor. I here	by declare that:			-		
My residence, post office	address and citiz	enship are as stated bel	ow next to my name.				
_		•	ne is listed below) or an original, aimed and for which a patent is				
		NOVEL COMP	OUNDS				
the specification of which	n (check only one	: item below):					
[] is attached hereto. OR [x] was filed on _ as U	• •		or PCT Internationa 4 and was amended on (MM/DI				
(if	applicable) reviewed and un	derstand the contents of	f the above-identified specification		ng the claims.		
I acknowledge the duty to	o disclose inform	ation which is material	to patentability as defined in 37	CFR §1.56	5, .		
I hereby claim foreign priority ber inventor's certificate or 365(a) of States of America, listed below ar inventor's certificate or of any PC claimed:	any PCT internated have also idented also international a	tional application which tified below, by checkin pplication having a filir	designated at least one country g the box, any foreign application g date before that of the application	other than on for pater	the United nt or		
PRIOR FOREIGN AND ANY I					PRIORITY		
Prior Foreign Application Number (s)		Country	Foreign Filing Date (MM/DD/YYYY))		PRIORITY CLAIMED		
1. 0319150.9		GB	14 August 2003		X		
2.							
3.							
4.							
5. I hereby claim the benefit under 'l	Firla 35 United S	States Code \$110(a) of a	ny United States provisional app	lication(s)	listed below:		
Application No.	inic 22, Onica 3	1	e (MM/DD/YYYY)	neation(S)	nsica ocion,		
1.		111115 Date					
2.							
3.							

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWED OF ATTODNEY

SIGNATURE

RESIDENCE &

CITIZENSHIP

POST OFFICE

ADDRESS

FULL NAME

OF INVENTOR

INVENTOR'S

SIGNATURE RESIDENCE &

CITIZENSHIP

POST OFFICE

ADDRESS

CITY

CITY

Harlow

Harlow

POST OFFICE ADDRESS

P O Box 1539

THOMPSON

POST OFFICE ADDRESS

P O Box 1539

FAMILY NAME

GlaxoSmithKline Corporate

Signature Rough

GlaxoSmithKline Corporate

Intellectual Property - UW2220,

Intellectual Property - UW2220,

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ATTORNEY'S DOCKET NUMBER PB60445

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Pennsylvania 19406-0939, US

LIH October 2004

Pennsylvania 19406-0939, US

COUNTRY OF CITIZENSHIP

STATE & ZIP CODE/COUNTRY

SECOND GIVEN NAME/INITIAL

COUNTRY OF CITIZENSHIP

STATE & ZIP CODE/COUNTRY

GB

GB

Continu		CATION WITH OWE	K OF ATT	ORNEI		
	 of America that is list International application 	enefit under 35, U.S.C. §120 of any United States sted below and, insofar as the subject matter of eaction in the manner provided by the first paragraphed in 37 C.F.R. §1.56 which became available be olication:	ch of the claims of th h of 35 U.S.C. 6112	is application is not. I acknowledge the	disclosed in the prior Uni	ted States or PCT
PRIOF	U.S. PARENT	APPLICATION or PCT PARENT	APPLICATION	Y		
					STATUS (Check of	nne)
U.S.	Parent Application or Number	PCT Parent Parent Filing I (MM/DD/YY	<u> </u>	PATENTED	PENDING	ABANDONED
prosecut	e this application a	Y: As a named inventor, I hereby appoint and to transact all business in the Patent and Customer Number 20462	the practitioners and Trademark Off	associated with the ice connected the	he Customer Numbers crewith	s provided below to
		nce and telephone calls to Customer N			610 2	SIMON 70 5019
like so	re believed to be imade are punishalize the validity of	statements made herein of my own knarue; and further that these statements ble by fine or imprisonment, or both, the application or any patent issuing	were made with under 18 U.S.C.	i the knowledge	that willful false si	atements and the
2	FULL NAME OF INVENTOR	JAMIESON	FIRST GIVEN NAME	E	SECOND GIVEN NAMEA	INITIAL
~	INVENTOR'S SIGNATURE	Signature	Craig		Date:	
0	RESIDENCE & CITIZENSHIP	Newhouse	STATE OR FOREIGH Lanarkshire,		COUNTRY OF CITIZENS	HIP
l	POST OFFICE ADDRESS	GlaxoSmithKline Corporate Intellectual Property – UW2220, P O Box 1539	King of Pruss		Pennsylvania 19	·
2	FULL NAME OF INVENTOR	FAMILY NAME MILLER	FIRST GIVEN NAMI David	E	second given name/s	NITIAL
	INVENTOR'S SIGNATURE	Signature			Date:	
0	RESIDENCE & CITIZENSHIP	Stevenage	STATE OR FOREIGH Hertfordshire		COUNTRY OF CITIZENS	INP
2	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Corporate Intellectual Property – UW2220, P O Box 1539	King of Pruss		Pennsylvania 19	
2	FULL NAME OF INVENTOR INVENTOR'S	FAMILY NAME RAMI Signature	FIRST GIVEN NAME Harshad		SECOND GIVEN NAME/I Kantilal	NITIAI,

STATE OR FOREIGN COUNTRY

STATE OR FOREIGN COUNTRY

Essex, GB

King of Prussia

FIRST GIVEN NAME

Mervyn

Essex, GB

King of Prussia

COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT					PB60445		
APPLICATION WITH	APPLICATION WITH POWER OF ATTORNEY						
() Declaration submitted with initial	Complex App No	te if known:					
() Declaration submitted after initial	filing (surcharge r	equired 37CFR1.16(e))		Filing Date			
			•	Group A	rt Unit:		
As below named	f inventor. 1 here	by declare that:		_1			
My residence, post office	address and citiz	zenship are as stated belo	w next to my name.				
		· -	e is listed below) or an original, fined and for which a patent is so	•	1		
		NOVEL COMPO	DUNDS				
the specification of which	h (check only one	e item below):					
			or PCT International and was amended on (MM/DD				
	reviewed and un		the above-identified specification	n, includin	g the claims,		
I acknowledge the duty to	o disclose inform	ation which is material to	o patentability as defined in 37 C	JFR §1.56.			
I hereby claim foreign priority ber inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation PRIOR FOREIGN AND ANY I	any PCT internated have also idented on all application.	ional application which d tified below, by checking having a filing date befor	lesignated at least one country of the box, any foreign application that of the application on which	ther than the for patent	ne United or inventor's		
Prior Foreign Application Number (s)	T	Country	Foreign Filing Date (MM/DD/YYYY))		PRIORITY CLAIMED		
1. 0319150.9		GB	14 August 2003		X		
2.							
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5.							
I hereby claim the benefit under T	Title 35, United S			ication(s) l	isted below:		
Application No.		Filing Date	(MM/DD/YYYY)				
2.							
3.							
							

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

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PRIOR U.S. PARENT APPLICATION (or PCT PARENT APPLICAT	ION		
	STATUS (Check one)			
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED

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	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	JAMIESON	Craig	
	INVENTOR'S	Signature / 1		Date:
	SIGNATURE	truig L		iolulou
0	RESIDENCE &	cmy	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Newhouse	Lanarkshire, Scotland	GB
,	POST OFFICE	POST OFFICE ADDRESS	Crry	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline Corporate	King of Prussia	Pennsylvania 19406-0939, US
		Intellectual Property - UW2220,	<u> </u>	
		P O Box 1539		
	175 (1 1 N. A.	FAMILY NAME	FIRST GIVEN NAME	
,	FULL NAME	MILLER		SECOND GIVEN NAMEZINITIAL
	OF INVENTOR	4	David	Drysdale
	INVENTOR'S	Signature		Date:
_	SIGNATURE	\align	CTATE OR CANDIGAL CO.	
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Stevenage	Hertfordshire, GB	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline Corporate	King of Prussia	Pennsylvania 19406-0939, US
		Intellectual Property – UW2220,		
		P O Box 1539		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAMEZINITIAL
2	OF INVENTOR	RAMI	Harshad	Kantilal
	INVENTOR'S	Signature		Date
	SIGNATURE			
0	RESIDENCE &	CLLA	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Harlow	Essex, GB	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline Corporate	King of Prussia	Pennsylvania 19406-0939, US
		Intellectual Property - UW2220,		
		P Q Box 1539		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	THOMPSON	Mervyn	SECOND GIVEN NAMEDINTIAL
-		Signature	I MELYNI	Date:
	INVENTOR'S SIGNATURE			Date.
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
v	CITIZENSHIP	Harlow	Essex, GB	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS	GlaxoSmithKline Corporate	King of Prussia	
	AMANISS	•	ixing of a fushia	Pennsylvania 19406-0939, US
		Intellectual Property – UW2220, P O Box 1539		
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